

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	11108.002
	First Named Inventor	David R. Diduch
	COMPLETE IF KNOWN	
	Application Number	10/084,283
	Filing Date	02/26/2002
	Art Unit	3761
	Examiner Name	

☐ Declaration Submitted with Initial Filing
 OR
 ☒ Declaration Submitted with Initial Filing (surcharge (37 CFR 1.16 (e)) required)

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Superelastic Suture Passing Devices and Methods

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/26/2002 as United States Application Number or PCT International

Application Number 10/084,283 and was amended on (MM/DD/YYYY) (if applicable).

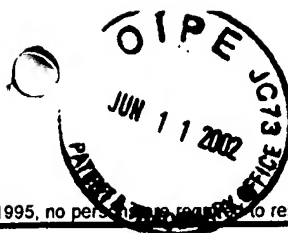
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number **27628** OR ☐ Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor

Given Name **David R.**
(first and middle [if any])

Family Name **Diduch**
or Surname

Inventor's
Signature

Date

Charlottesville

Virginia

USA

US

Residence: City

State

Country

Citizenship

1560 Old Oaks Drive

Mailing Address

Charlottesville

Virginia

22902

US

City

State

ZIP

Country

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

Given Name **James G.**
(first and middle [if any])

Family Name **Whayne**
or Surname

Inventor's
Signature

Date

Chapel Hill

North Carolina

USA

US

Residence: City

State

Country

Citizenship

137 New Castle Drive

Mailing Address

Chapel Hill

North Carolina

27517

US

City

State

ZIP

Country

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	11108.002
	First Named Inventor	David R. Diduch
	COMPLETE IF KNOWN	
	Application Number	10/084,283
	Filing Date	02/26/2002
<input type="checkbox"/> Declaration Submitted with Initial Filing	Art Unit	3761
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Superelastic Suture Passing Devices and Methods

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 02/26/2002 as United States Application Number or PCT International

Application Number 10/084,283 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



COPY OF PAPERS
ORIGINALLY FILED

PTO/SB/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person shall be required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number or Bar Code Label **27628** OR ☐ Correspondence address below

PATENT & TRADEMARK OFFICE

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor

Given Name David R.
(first and middle [if any])

Family Name Diduch
or Surname

Inventor's
Signature

Date

Charlottesville

Virginia

USA

US

Residence: City

State

Country

Citizenship

1560 Old Oaks Drive

Mailing Address

Charlottesville

Virginia

22902

US

City

State

ZIP

Country

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name James G.
(first and middle [if any])

Family Name Whayne
or Surname

Inventor's
Signature

Date

5/29/02

Chapel Hill

North Carolina

USA

US

Residence: City

State

Country

Citizenship

137 New Castle Drive

Mailing Address

Chapel Hill

North Carolina

27517

US

City

State

ZIP

Country

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.